

HC-One Limited

Ashington Grange

Inspection report

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17 March 2021

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26 April 2021

Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Requires Improvement ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

About the service

Ashington Grange is a care home providing nursing and personal care for up to 59 people, some of whom are living with a dementia. At the time of the inspection, there were 32 people living at the home.

People's experience of using this service and what we found

Action had been taken in relation to the IPC issues identified at our previous inspection, which led to enforcement action. However, we found new shortfalls relating to infection control and the management of risk. Staff were not using the correct PPE required for a specific medical procedure associated with one person's care, to ensure they were protected from the risk of infection. One person's care plan and risk assessments had not been updated following several behavioural incidents to ensure staff were aware of the actions to take to manage and minimise the risk to others. These issues had not been identified by the provider's governance system.

Safeguarding allegations were reported to the local authority. However, it was not always clear which incidents should be reported to the police by staff. We have made a recommendation about this.

Medicines were managed safely. There were sufficient staff deployed to meet people's needs.

Information requested by CQC during the inspection was not always sent in a timely manner. We have made a recommendation about this.

There was a cheerful atmosphere at the home. Staff spoke positively about working at the home and the people they cared for.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was requires improvement (published 29 December 2020)

Why we inspected

We carried out a focused inspection of this service on 26 November 2020. A breach of legal requirements was found in relation to safe care and treatment. We undertook this inspection to confirm if the provider was now meeting legal requirements. This report only covers our findings in relation to the key questions of safe and well-led which contained those requirements.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has remained the same. This is based on the findings at this inspection.

We looked at infection prevention and control measures under the safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

You can read the report from our last inspection, by selecting the 'all reports' link for Ashington Grange on our website at www.cqc.org.uk.

Enforcement

We are mindful of the impact of the COVID-19 pandemic on our regulatory function. This meant we took account of the exceptional circumstances arising as a result of the COVID-19 pandemic when considering what enforcement action was necessary and proportionate to keep people safe as a result of this inspection. We will continue to discharge our regulatory enforcement functions required to keep people safe and to hold providers to account where it is necessary for us to do so

We have identified two breaches of the regulations in relation to safe care and treatment and good governance. Please see the action we have told the provider to take at the end of this report.

Follow up

We will work alongside the provider and local authority to monitor progress. We will return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was not always safe.

Details are in our safe findings below.

Requires Improvement ●

Is the service well-led?

The service was not always well-led.

Details are in our well-led findings below.

Requires Improvement ●

Ashington Grange

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team

The inspection was undertaken by one inspector.

Service and service type

Ashington Grange is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

We gave short notice of the inspection. This supported the staff and ourselves to manage any potential risks associated with COVID-19.

What we did before the inspection

We did not request a provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. We sought feedback from the local authority. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with five members of staff. This included the registered manager and four care staff. We also spoke with one person who lived at the home. We reviewed two people's care records and records relating to

medicines and staff recruitment.

After the inspection

We reviewed records relating to health and safety which the registered manager sent us electronically.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated requires improvement. At this inspection, this key question has remained the same. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

Preventing and controlling infection; Assessing risk, safety monitoring and management; Learning lessons when things go wrong

At our last inspection a safe and effective infection control system was not fully in place to ensure that people were protected from the risk of infection. This was a breach of Regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Whilst improvements had been made in relation to the issues identified at the previous inspection, further improvements were required, and the provider remained in breach of Regulation 12

- An effective system to assess, monitor and manage risk was still not fully in place.
- Staff were unaware of the government guidance relating to the need for additional PPE during aerosol generating procedures (AGP). An AGP is a medical procedure that can result in the release of airborne particles (aerosols) from the respiratory tract. Staff were not wearing the extra PPE required to help reduce the risk of cross infection.
- One person's care plan and risk assessments had not been updated following several behavioural incidents to ensure staff were aware of the actions to take to manage and minimise the risk to others.

The failure to have an effective system in place to assess, monitor and manage risk was an ongoing breach of Regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Following our inspection, the registered manager told us that action had been taken to address this issue.

- The home was clean and well maintained. Action had been taken following our previous inspection in relation to the management of waste. One staff member told us, "It's neat, it's organised and that's what I like."

Systems and processes to safeguard people from the risk of abuse

- Safeguarding allegations were reported to the local authority; however it was not always clear which incidents should be reported to the police by staff.

We recommend the provider reviews their safeguarding system and instructions to staff, to ensure it is clear which incidents should be reported to the relevant agencies in line with the provider's safeguarding responsibilities.

Using medicines safely

At our last inspection we recommended the provider reviewed current best practice guidance regarding the storage of medicines. The provider had made improvements.

- Medicines were managed safely. A system was in place to receive, record, store and dispose of medicines safely.

Staffing and recruitment

- There were enough staff deployed to meet people's needs.
- A safe recruitment system was in place to help ensure suitable staff were appointed, who were of good character and who had the appropriate skill sets.

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated requires improvement. At this inspection, this key question has remained the same. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

At our last inspection we recommended that the provider reviewed their IPC system to ensure best practice guidance was followed and embedded into practice. Sufficient action had not been taken to improve.

- An effective system to monitor the safety of the service was still not fully in place. We identified shortfalls relating to IPC and the management of risk which had not been identified by the provider's governance system.

The failure to have an effective system to monitor the safety of the service was a breach of Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Following our inspection, the registered manager told us that action had been taken to address the shortfalls we had raised.

- Information requested by CQC during the inspection was not always sent to us in a timely manner. In addition, there had been a delay in submitting a safeguarding notification. The submission of notifications helps ensure that CQC has oversight of all notifiable events to make sure that appropriate action has been taken.

We recommend the provider reviews their information management system to ensure documentation and information requested and required by CQC is submitted in a timely way.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- There was a cheerful atmosphere at the home. Staff spoke positively about working at the home and the people they cared for. The registered manager told us, "Staff have been absolutely amazing during the pandemic."
- We visited the home on St Patrick's day and people were enjoying Irish inspired food, drink and activities. We spoke with one person who spoke enthusiastically about living at the home and the staff who worked there.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The registered manager was aware of their duties under the duty of candour.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- Processes were in place to involve people and staff in the running of the home.

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	Regulation 12 HSCA RA Regulations 2014 Safe care and treatment
Treatment of disease, disorder or injury	An effective system was not fully in place to assess, monitor and manage risk. Regulation 12 (1)(2)(a)(b)(h).
Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	Regulation 17 HSCA RA Regulations 2014 Good governance
Treatment of disease, disorder or injury	An effective system to monitor the safety of the service was not fully in place. Regulation 17 (1)(2)(a)(b)(f).